



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

April 12, 2006

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Cetak's Gourmet Meats & Sausages, 4107 Pioneer Woods Drive, Suite 104 requesting a class D liquor license.

Cetak's will specialize in the sale of meats with 90% of the total sales being meat products.

Jason Cetak, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Jason Cetak was born in Ord, Nebraska. He attended California State University graduating in 1998.

Jason Cetak employment history is as follows:

1999 - Present	Product Specialist, Johnson & Johnson	New Brunswick, NJ.
1997 - 1999	Teacher, Coordinate School	Torrance, CA.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) JASON CETAK - CETAKS GOURMET MEATS

☒ Manager

☒ Owner

Other _____

Name: JASON CETAK

US Citizen ?

☒ Yes

No

Has applicant ever been cited for liquor law violations ? ☒ No Yes

Explain _____

Does applicant have an interest in another liquor license ? ☒ No Yes

Explain _____

Is spouse qualified to hold a license ? ☒ Yes No N/A

How is applicant if not an owner to be paid ? Salary Hourly

How many hours will applicant be at the establishment ? 50+

Any other employment ? No Yes, explain _____

Any previous experience with a liquor license? Yes

☒ No

Any criminal convictions ? ☒ No Yes

Comments _____

Is applicant a property owner in Lincoln ? ☒ Yes No

Is applicant involved in any civil litigation ? ☒ No Yes

Comments _____

☒ Photo

☒ Records Check

☒ References

Comments _____

Interview Date 4 / 12 / 06

Liquor License Business Report

Completed by Inv. Fosler #843

Business Name: C&TAKS

Address : 4107 Pioneer Woods Phone: _____

Type of Investigation : Purchase Upgrade Expansion New
Owner Manager Other: _____

Type of Business: GOURMET MEATS

Liquor Class A B C D I J K Catering Other: _____

Ownership: Corporation Partnership Individual

Amount Financed: 200,000 Source: UNION BANK

Lease Agreement: 5YR @ 2876 MO

Sales: %Food: 90 %Liquor: 10

Located: Commercial Industrial Residential

Traffic Flow: moderate Off Street Parking: Yes No

Ready for Operation: Yes No Est Date: may 06

Food Service: Yes No Employees: F/T 2 P/T 2

Est Seating: NONE Est Daily Customers 75

Hours of Operation: M-F 10-7pm SAT 9-4

Any Additional Comments: _____

STATE OF NEBRASKA

Dave Heineman
Governor

PH: 5/8/06
NEBRASKA LIQUOR CONTROL COMMISSION
Hobert B. Rupe Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7252 (TTY)

March 30, 2006

Lincoln City Clerk
555 So 10th St
Suite 103
Lincoln NE 68508

RE: Cetak's Gourmet Meats & Sausages

*Cetak's Gourmet Meats & Sausages
4107 Pioneer Woods DR, Suite 104
Class D*

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) Publicize one time not less than 7 days, not more than 14 days prior to date of hearing.
- 2) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE PROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Randy Seybert
Randy Seybert
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

An Equal Opportunity/Affirmative Action Employer

R.L. (Dick) Coyne
Commissioner

*A6-033165
182*
CITY OF LINCOLN
NEBRASKA
2006 APR 3 PM 1 54
CITY CLERK'S OFFICE

*CTIS
581548*

City

APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

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MAR 28 2006

NEBRASKA LIQUOR
CONTROL COMMISSION

OFFICE USE ONLY

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES CHECK DESIRED CLASS(S)

RETAIL LICENSE(S)

- | | | | |
|-------------------------------------|---|---|---------|
| <input type="checkbox"/> | A | Beer, On Sale Only | \$45.00 |
| <input type="checkbox"/> | B | Beer, Off Sale Only | \$45.00 |
| <input type="checkbox"/> | C | Beer, Wine & Distilled Spirits, On & Off Sale | \$45.00 |
| <input checked="" type="checkbox"/> | D | Beer, Wine & Distilled Spirits, Off Sale Only | \$45.00 |
| <input type="checkbox"/> | I | Beer, Wine & Distilled Spirits, On Sale Only | \$45.00 |

Class K Catering license may be added to any of these classes with an additional fee of \$100.00 and filing form 35-4202

MISCELLANEOUS

- | | | | |
|--------------------------|---|--|----------------------|
| | | | Bond |
| <input type="checkbox"/> | L | Craft Brewery (Brew Pub) | \$295.00 1,000 min. |
| <input type="checkbox"/> | O | Boat | \$ 95.00 N/A |
| <input type="checkbox"/> | V | Manufacturer, Beer, Wine & Distilled Spirits
(additional fee of \$100 to \$1,000-call for exact amount) | \$ 45.00 10,000 min. |
| <input type="checkbox"/> | W | Wholesale Beer | \$545.00 5,000 min. |
| <input type="checkbox"/> | X | Wholesale Liquor | \$795.00 5,000 min. |
| <input type="checkbox"/> | Y | Farm Winery | \$295.00 1,000 min. |

All Class C licenses expire October 31st

All other licenses expire April 30th

Catering expire same as underlying retail license

TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

- ☐ Individual License, requires insert form 1
- ☐ Partnership License, requires insert form 2
- ☒ Corporate License, requires insert form 3a and manager application 3b

NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(Commission will call this person with any questions we may have)

Name: Sason Cetak Phone: 402-630-6103

Firm Name: Cetak's Gourmet Meats & Sausages

Firm address: 4107 Pioneer Woods Drive, Suite 104,
Lincoln, NE 68506

PREMISE INFORMATIONTrade Name (doing business as) Cetak's Gourmet Meats & SausagesStreet Address #1 4107 Pioneer Woods Drive, Suite 104

Street Address #2 _____

City Lincoln County LancasterZip Code 68506Telephone number at premise to be licensed TBDIs this location inside the city/village corporate limits: ☒ YES ☐ NO

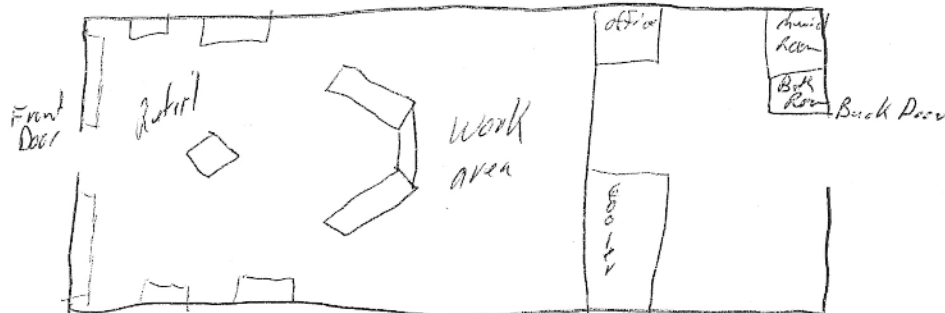
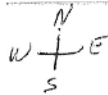
Mail to Address (where you want receipt of Liquor Control Commission mailings)

Name: Jason CetakStreet Address #1 6108 S. 94th St

Street Address #2 _____

City Lincoln County LancasterZip Code 68526**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED**

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations. No blue prints please. Be sure to indicate the direction north and number of floors of the building.



APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, **EVER** been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

- ☐ Yes If yes, please explain below or attach a separate page.
☒ No

2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required). Liquor Inventory may be taken at time of application being submitted.

- ☐ Yes
Current business name and license number _____
☒ No

3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license. If yes, attach agreement. **Please note:** This agreement is not effective until Commissions assigns you a 3-digit ID number.

- ☐ Yes
☒ No

4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.

- ☒ Yes
☐ No Union Bank & Trust attn: AlZach

5. Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application.

☐

Yes

☒

No

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.

☐

Yes

☒

No

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? (No silent partners)

☐

Yes

☒

No

8. Are the premises to be licensed within 150 ft of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Neb. Rev. Stat. 53-177.

☐

Yes

☒

No

9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties.

☐

Yes

☒

No

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions.

Union Bank

Jason & Melissa Cefak

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.

None

12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.

Dave Patton
40 to 50

13. List the training or experience (when and where) of the person listed in #12 above in connection with selling and/or serving alcohol products.

None

14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

☒ Lease: expiration date *April 2011*
☐ Deed
☐ Purchase Agreement

15. When do you intend to open for business? *May 2006*

16. What will be the main nature of business? What are the anticipated hours of operation?

Gourmet Meat Market & Retail M-F 10-7 S 9-4

17. List the principal residence(s) for the past 10 years for all persons required to sign application, including spouses. If necessary attach a separate sheet.

Applicant Name	From: Year	To: Year	City/State
<i>Dason Cetak</i>	<i>2003</i>	<i>present</i>	<i>Lincoln</i>
<i>" "</i>	<i>1999</i>	<i>2003</i>	<i>Omaha</i>
<i>" "</i>	<i>1997</i>	<i>1999</i>	<i>Placencia CA</i>
<i>" "</i>	<i>1996</i>	<i>1999</i>	<i>Fullerton CA</i>
<i>Melissa Cetak</i>	<i>2003</i>	<i>present</i>	<i>Lincoln</i>
<i>" "</i>	<i>1996</i>	<i>2003</i>	<i>Omaha</i>

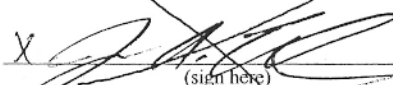
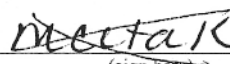
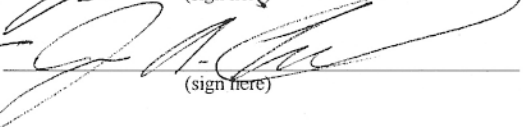
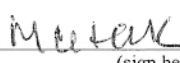
The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance

of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

8 2006

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

X  (sign here)	X  (sign here)
 (sign here)	 (sign here)
_____ (sign here)	_____ (sign here)
_____ (sign here)	_____ (sign here)
_____ (sign here)	_____ (sign here)

Subscribed in my presence and sworn to before me this

16th day of March, 2006

Margaret J. Frankforter
Notary Public Signature & Seal

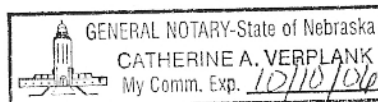
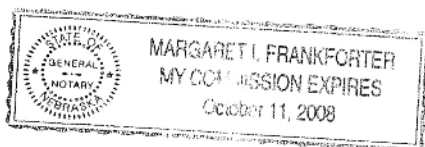
Subscribed in my presence and sworn to before me this

22 day of March 2006

Catherine A. Verplank
Notary Public Signature + Seal

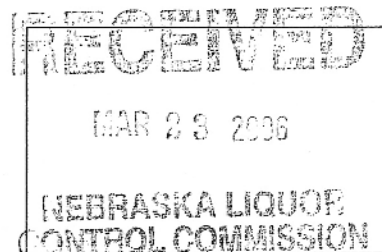
In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4010
REV. 4/05



**APPLICATION FOR LIQUOR LICENSE
CORPORATION/LLC INSERT - FORM 3a**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: <http://www.lcc.ne.gov/>



Name of Corporation or Limited Liability Company that will hold license. Attach copy of Articles of Incorporation. (Document must show [barcode] receipt by Secretary of States Office.

Cetak's Gourmet Meats & Sausages Inc.

Corporate Street Address: 4107 Pioneer Woods Drive Suite 104

City: Lincoln State: NE Zip Code: 68506

Corporate Telephone Number 402-630-6103

Total number of shares issued (if corporation) 2,000

Is this a Non Profit Corporation? ☐ YES ☒ NO

If yes, what is your Federal ID #? _____

Name of Registered Agent _____

Name of Proposed Manager Jason Cetak

This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: Cetak First Name: Jason MI A

Address Street 6108 S. 94th St. City Lincoln

State NE Zip Code 68526 Home Phone number 402-327-0734

Social Security Number _____ Date of Birth _____

List names of all Officers, Directors, Stockholders, Members and their Spouses

Last Name ~~Melissa~~ Cetak First Name Melissa

Social Security Number _____ Date of Birth 1-1

Title Vice-President Number of Shares 1,000

Spouse Name (indicate N/A if single) _____

Spouse Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Last Name _____ First Name _____

Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Spouse Name (indicate N/A if single) _____

Spouse Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Last Name _____ First Name _____

Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

Spouse Name (indicate N/A if single) _____

Spouse Social Security Number _____ Date of Birth _____

Title _____ Number of Shares _____

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MAR 28 2006

Is this Corporation or Limited Liability Company controlled by another Corporation?

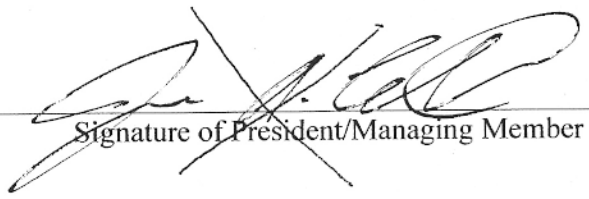
☐ Yes ☒ No

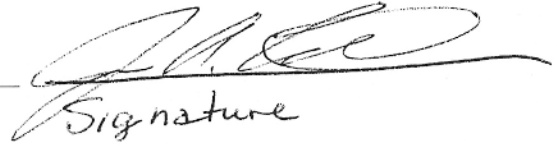
If yes, give name of corporation and supply organizational chart

NEBRASKA LIQUOR
CONTROL COMMISSION

Indicate tax year with the IRS

Starting Date _____ Ending Date _____

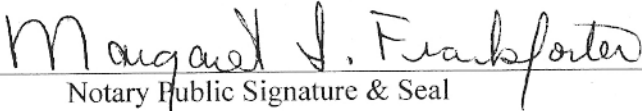

Signature of President/Managing Member


Signature

Notary Public Signature & Seal

Subscribed in my presence and sworn to before me this

16th day of March, 2006

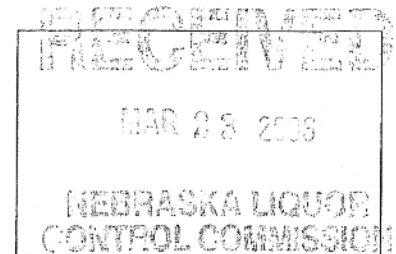

Notary Public Signature & Seal



In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

**APPLICATION FOR LIQUOR LICENSE
CORPORATION MANAGER - FORM 3b
*MUST BE A NEBRASKA RESIDENT***

301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: <http://www.lcc.ne.gov/>



LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION Cetak's Gourmet Meats & Sausages
CLASS & LICENSE NUMBER Scorp. 80-0119355
TRADE NAME Cetak's Gourmet Meats & Sausages
STREET ADDRESS 4107 Pioneer Woods Drive, CITY Lincoln
Suite 104

SIGNATURE OF CORPORATION PRESIDENT/CEO

APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)

NAME Jason Cetak
ADDRESS 6108 South 94th St
CITY Lincoln STATE NE ZIP CODE 68526
HOME PHONE NUMBER 402-603-0734 BUSINESS PHONE NUMBER 402-630-6103
SEX ☒ MALE ☐ FEMALE SOCIAL SECURITY NUMBER _____
DATE OF BIRTH _____ PLACE OF BIRTH Ord, NE
DRIVERS LICENSE NUMBER & STATE _____ NE

SPOUSES INFORMATION (IF NOT MARRIED INDICATE)

SPOUSE NAME Melissa Cetak
SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____
DRIVERS LICENSE NUMBER & STATE _____

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MAR 28 2006

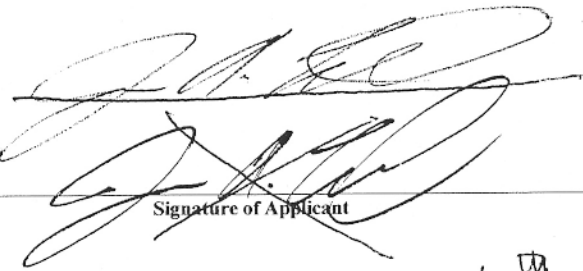
**PERSONAL OATH AND CONSENT OF INVESTIGATION
MUST BE SIGNED BY APPLICANT & SPOUSE**

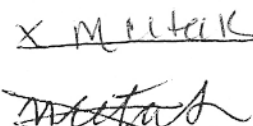
NEBRASKA LIQUOR
CONTROL COMMISSION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

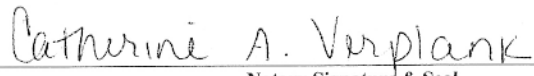
X 
Signature of Applicant

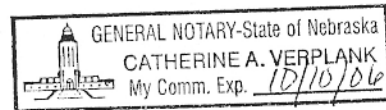
X 
Signature of Spouse

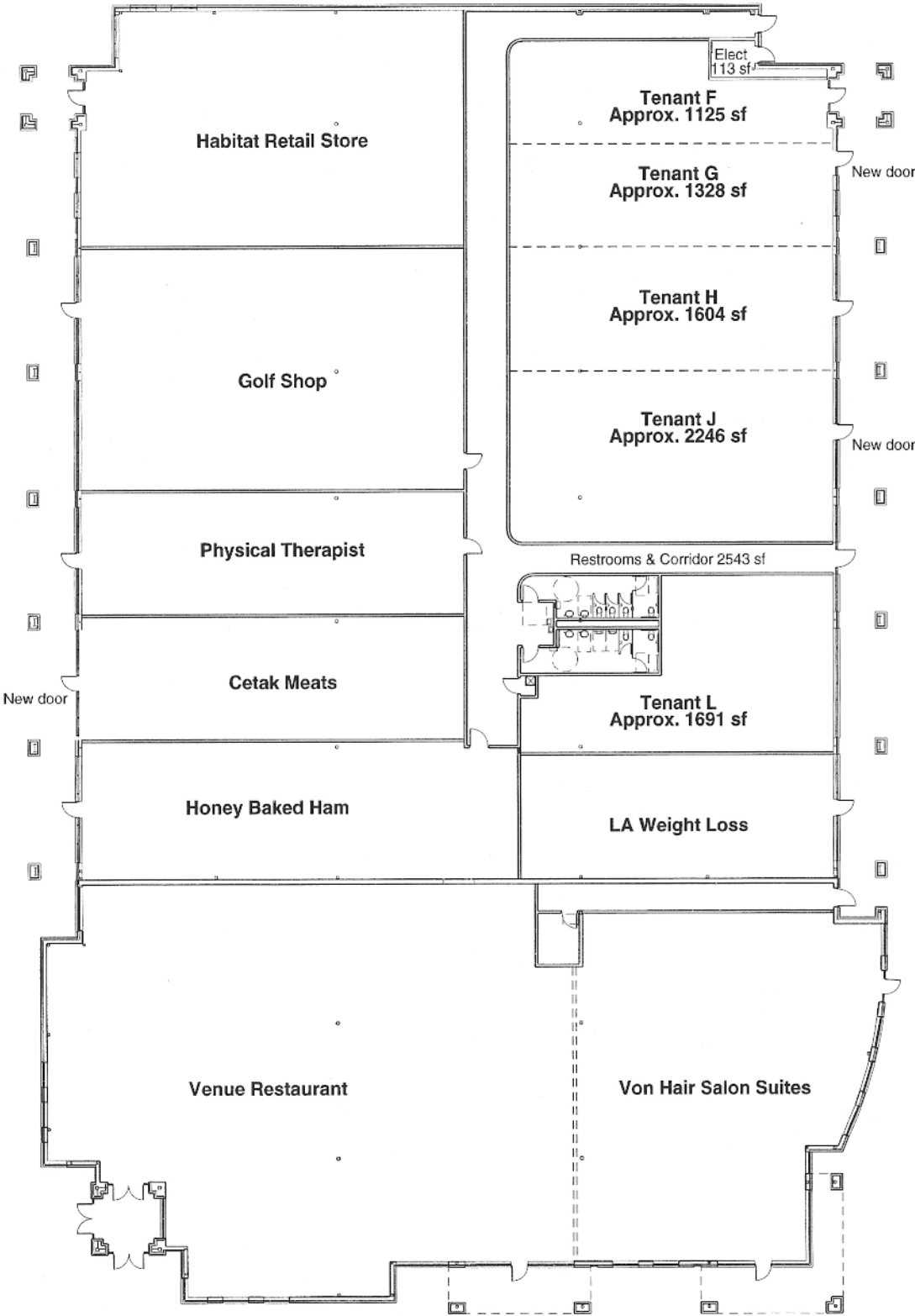
Subscribed in my presence and sworn to before me this 16th
day of March 2006

Subscribed in my presence and sworn to before me this 22
day of March, 2006


Notary Signature & Seal


Notary Signature & Seal





**Tenant
Diagram**

Scale: none
Date - 02.27.06

Pioneer Woods Retail Development
4107 Pioneer Woods Drive - Bldg B North

SF numbers are
usable area only.

RECEIVED

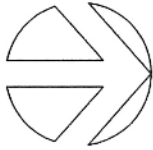
MAR 28 2006

NEBRASKA LIQUOR
CONTROL COMMISSION

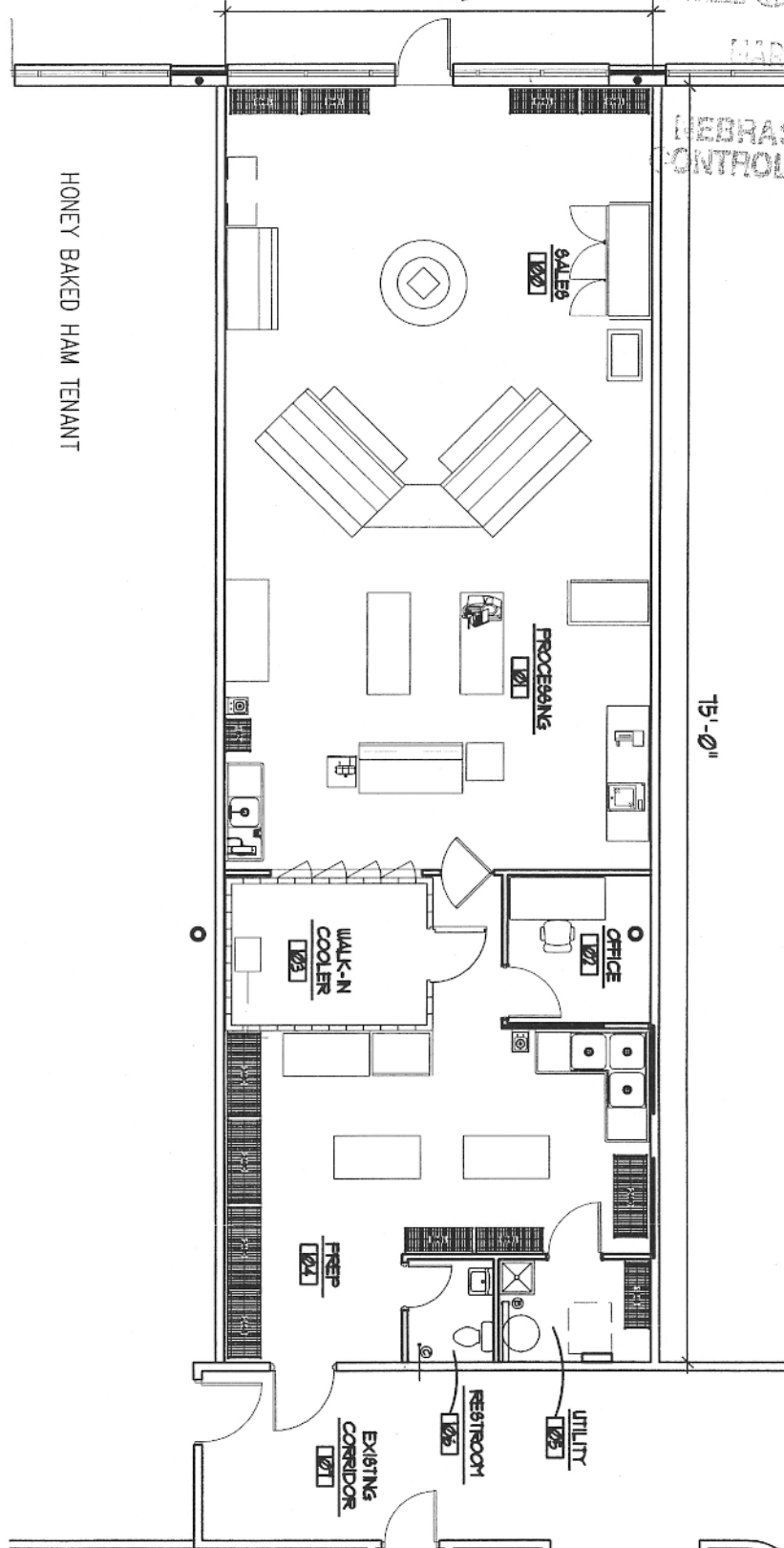
24'-8 1/2"

75'-0"

HONEY BAKED HAM TENANT



FLOOR PLAN
SCALE: 3/32" = 1'-0"



CETAK'S GOURMET MEATS
4107 Pioneer Woods Drive Suite 106
Building B, North
Tenant E
Lincoln, NE



Consultants to the Food Service Industry

209 South 9th Street, Lincoln, NE 68508 Phone: 402-475-1787 Fax: 402-475-180